

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		48	5/3/01
FORMALITY REVIEW	R.	JC 872	06-01-01
RESPONSE FORMALITY REVIEW	MN	JC 872	09/01/01

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	5/3/01
2	✓	✓	5/3/01
3	✓	✓	5/3/01
4	✓	✓	5/3/01
5	✓	✓	5/3/01
6	✓	✓	5/3/01
7	✓	✓	5/3/01
8	✓	✓	5/3/01
9	✓	✓	5/3/01
10	✓	✓	5/3/01
11	✓	✓	5/3/01
12	✓	✓	5/3/01
13	✓	✓	5/3/01
14	✓	✓	5/3/01
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28	✓	✓	5/3/01
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46	✓	✓	5/3/01
47	✓	✓	5/3/01
48	✓	✓	5/3/01
49	✓	✓	5/3/01
50	✓	✓	5/3/01

Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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7/7 06/01/01  
 5-9-01  
 9-9-01